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n of information unless if displays a valid OMB control n Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008 514572001200 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) Application Number 10/562 803 Filed (Int'l) July 18, 2003 DNA CHIP BASED GENETIC TYPING Art Unit 1634 Examiner N. Bhat This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Small Entity Fee Fee One month (37 CFB 1.17(a)(1)) \$120 \$60 60.00 Two months (37 CFR 1.17(a)(2)) \$460 \$230 Three months (37 CFR 1.17(a)(3)) \$1050 \$525 Four months (37 CFB 1.17(a)(4)) \$1640 \$820 Five months (37 CFR 1.17(a)(5)) \$2230 \$1115 X Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 I have enclosed a duplicate copy of this sheet. Fee Transmittal Form (PTO/SB/17) is attached to this submission in duplicate. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 /Yan Leychkis/ April 14, 2008 Signature Date Yan Levchkis (858) 314-7702 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

forms are submitted.

X Total of